Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

A 11 Francisco	correspondence including debelow or directed other	a the Datent advance or	ders and notification of m) specifying a new corresp	aintenance fees will condence address; and	dor (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for	
TURRENT CORRESPONDE	ENCE ADDRESS (Note: Use Blo	ck 1 for any change of address)	Fee(s	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
SCULLY SCO 400 GARDEN C SUITE 300	7590 09/11/ TT MURPHY & I		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unit States Postal Service with sufficient postage for first class mail in an envelo addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (571) 273-2885, on the date indicated below.				
GARDEN CITY	, NY 11530					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		
10/531 494	10/531,494 04/15/2005		Gareth G. Hougham	YOR920020293USI		9075	
APPLN. TÝPE	I: LAND GRID ARRAY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	. DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/11/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
HARVEY, JAMES R 2833			439-066000				
Change of correspondence address or indication of "Fee Address" (37 R 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a	o to 3 registered patent attorneys natively, Ingle firm (having as a member a or agent) and the names of up to attorneys or agents. If no name is Daniel P. Morris, Esc.			
ASSIGNEE NAME A	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or type	pe)			
DI CACE NOTE: 11.	nless an assignee is iden rth in 37 CFR 3.11. Com	tified below no assignee	e data will appear on the p OT a substitute for filing an (B) RESIDENCE: (CITY	atent. If an assignee assignment.		document has been filed for	
International Business Machines Corporation Armonk, New York							
] IndividualXXXCorp	poration or other private g	roup entity 🔲 Government	
) are submitted: No small entity discount # of Copies	permitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ★☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500510 (enclose an extra copy of this form).				
Change in Entity St	tatus (from status indicat	ed above)					
a. Applicant clai	ms SMALL ENTITY sta	tus. See 37 CFP 1.27.	☐ b. Applicant is no lor	nger claiming SMALL	ENTITY status. Sec 37 (CFR 1.27(g)(2).	
OTE: The Issue Fee a terest as shown by th	and Publication Fee (if re e records of the United S	quired) will not be accept tates Patent and Trademan	ted from anyone other than rk Office.	the applicant; a regist	ered allomey or agent; or	the assignee or other party i	
Authorized Signature			December 11, 2008 Date				
Typed or printed na							
his collection of information application. Confidation the completion formation and/or applications.	rmation is required by 37 entiality is governed by 3 ted application from to t	CFR 1.311. The informa 35 U.S.C. 122 and 37 CF. he USPTO. Time will va purden, should be sent to	tion is required to obtain or R 1.14. This collection is es ry depending upon the indi the Chief Information Office	retain a benefit by the stimated to take 12 m ividual case. Any con cer, U.S. Patent and T	e public which is to file (a inutes to complete, includ nments on the amount of rademark Office, U.S. De	nd by the USPTO to process ling gathering, preparing, an time you require to complet epartment of Commerce, P.C.	

ox 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450. lexandria, Virginia 22313-1450.

Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

STRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where propriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as licated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for intenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) have its own certificate of mailing or transmission. 09/11/2008 7590 23389 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. SCULLY SCOTT MURPHY & PRESSER, PC 400 GARDEN CITY PLAZA SUITE 300 GARDEN CITY, NY 11530 (Depositor's name (Signature CONFIRMATION NO FIRST NAMED INVENTOR ATTORNEY DOCKET NO. FILING DATE APPLICATION NO. YOR920020293US1 9075 Gareth G. Hougham 10/531,494 04/15/2005 TLE OF INVENTION: LAND GRID ARRAY FABRICATION USING ELASTOMER CORE AND CONDUCTING METAL (旨任也) OR MESH PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE PUBLICATION FEE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE 12/11/2008 \$1740 \$300 \$0 \$1440 nonprovisional NO CLASS-SUBCLASS ARTUNIT **EXAMINER** 439-066000 HARVEY, JAMES R 2833 Scully, Scott, Murphy & Presser, P.C 2. For printing on the patent front page, list Change of correspondence address or indication of "Fee Address" (37 (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☑ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Daniel P. Morris, Esc listed, no name will be printed. Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE International Business Machines Corporation Armonk, New York ease check the appropriate assignee category or categories (will not be printed on the patent): 🔲 IndividualXXXCorporation or other private group entity 🔲 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) i. The following fee(s) are submitted: A check is enclosed. Missue Fee Payment by credit card. Form PTO-2038 is attached. Why blication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500510 (enclose an extra copy of this for Advance Order - # of Copies ___ (enclose an extra copy of this form). Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. OTE: The Issue Fee and Publication Fee (if equired) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in terest as shown by the records of the United States Patent and Trademark Office. December 11, 2008 Authorized Signature Keopold Presser 19,827 Registration No. Typed or printed name

his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, an abmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complet is form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.C. ox 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 lexandria, Virginia 22313-1450.

Inder the Paperwork Reduction Act of 1935, no persons are required to respond to a collection of information unless it displays a valid OMB control number.